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The Grotesque Bird Flu Scam and How Colds or Flus Should Be Treated

Analysis by A Midwestern Doctor | March 14, 2025

STORY AT-A-GLANCE

- A massive industry exists to prevent pandemics, but despite receiving billions each year, it routinely fails to prevent pandemics or provide viable ways to address those which emerge
- This industry rests upon the lie that viral diseases cannot be treated, when in reality there are many effective, over-the-counter and unpatentable treatments for viral illnesses
- The industry engages in cruel and unnecessary animal experimentation, which wastes billions each year and repeatedly creates the pandemics it is supposed to prevent due to how frequently lab leaks occur
- The "war against bird flu" highlights key issues within the pandemic prevention industry, where billions have now been spent killing over 100 million birds, yet all that has accomplished is raising egg prices
- This article explores how many forgotten therapies can treat both severe viral illnesses and rapidly address common conditions like colds and flus

Almost every year, it seems a pandemic is hyped up. I would argue that's because:

- They give federal agencies (e.g., the CDC) a way to justify their necessity and get Congressional funding.

- The media thrives off of hooking the public through fear and appeasing its sponsors (e.g., the pharmaceutical industry).
- It sustains a biodefense industry that uses fear to get a lot of money (e.g., 27.7 billion dollars in 2023[1]) to "prevent" pandemics.
- Tackling many of the real health issues facing our country requires confronting the vested interests responsible for them and addressing the underlying causes of chronic illnesses in the country. In contrast, going to war against a disease is far easier and receives minimal pushback but allows the government to present the facade of safeguarding our health.

As such, we will frequently see a myriad of dubious pandemic preventatives be pushed on us[2] (e.g., the mass slaughter of livestock, the newest "emergency" vaccine, or ineffective and unsafe antivirals like Tamiflu). However despite the pandemic failing to materialize or the preventatives failing to work, no one remembers, and before long the cycle begins anew.

Biodefense

In a previous article, I discussed how the biodefense industry regularly cultivates bioweapons in labs to "protect" us from them. Before COVID-19, this industry had been under great scrutiny as many within the scientific community were worried its risky actions could lead to a catastrophic lab leak.

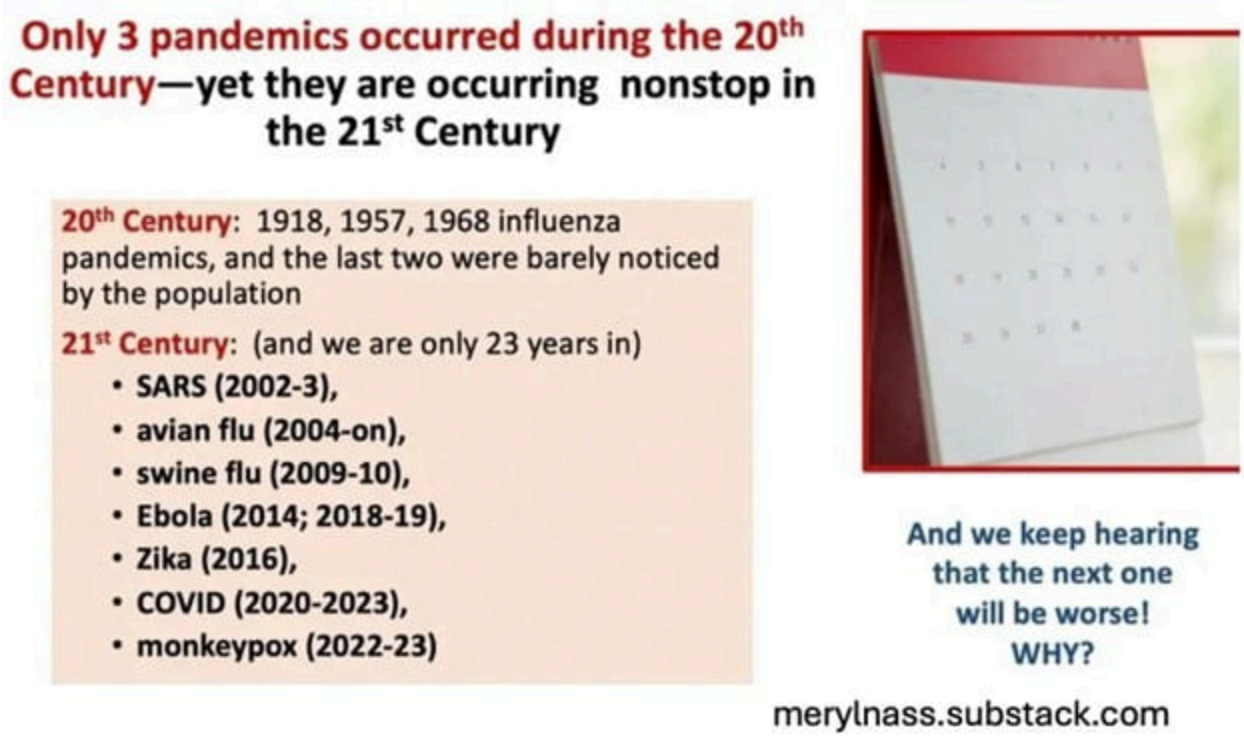
However, once SARS-CoV-2 leaked, the entire scientific establishment chose to double down on this research and label any insinuation lab leaks could occur "a conspiracy theory" or "a danger to science."

Note: *This characterizes Peter Hotez, who in 2012 secured a 6.1 million grant[3] from the NIH to develop a SARS vaccine with the stated aim of responding to any "accidental release from a laboratory,"[4] some of which was then used to fund gain-of-function research conducted by the leader of the Wuhan lab in 2017,[5] but after people became*

aware of the 2019 lab leak, Hotez switched to denying lab leaks and attacking those who discussed them.

These leaks are alarmingly common and remarkably, the industry has not addressed it, as its funding is contingent on a threat continuing to exist (rather than it being eliminated). Furthermore, many of these lab leaks are quite consequential such as:

- In 1950, the U.S. Navy covertly sprayed "harmless" bacteria in the San Francisco Bay Area, causing infections and fatalities. Those bacteria then became endemic in the area.[6]
- The Cambridge Working Group estimated in 2014 that dangerous lab leaks occur, on average, twice each week in the U.S. alone, and by 2018 this number had risen to an average of four times per week.[7]
- Numerous fatal lab leaks involving smallpox and anthrax occurred in the U.S., U.K., and Soviet Union.[8]
- Lyme disease emerging next to a U.S. government facility that was weaponizing the same bacteria.[9]
- The 1977 H1N1 influenza pandemic being traced back to a lab leak.[10]
- The 2001 Anthrax attacks in the U.S. being linked to a weaponized strain found only in bioweapons labs.[11]
- Numerous SARS lab leaks occurring since 2002,[12] some of which led to broader outbreaks (and hence why Hotez applied for his vaccine grant).
- Respiratory syncytial virus (RSV) actually emerging from chimpanzee research activities.[13]
- Numerous disastrous veterinary pandemics having emerged from leaks.[14]
- Significant evidence suggests **the current bird flu pandemic originated from a USDA lab leak**.



Note: A more detailed list of consequential lab leaks can be found here.

Vivisection

One of the major sources of extreme and unnecessary animal cruelty is the animal research industry, which sacrifices over 100 million animals each year,[15] frequently in horrific ways that have no scientific value whatsoever.

Vivisection (first used in 1707) describes the practice of cutting open animals with a central nervous system and has been integral to biomedical science. Since this was quite cruel, divided opinions emerged.

One school believed medical science must be objective, rational, and dispassionate so it was unethical to be squeamish or sentimental about hurting conscious animals if that "advanced medical science," while the other believed there was no ethical justification for knowledge gained from vivisection — highlighting the divide in medicine between doctors being technicians who inflicted "necessary treatments on patients" regardless of the suffering it caused and doctors being compassionate healers who made an effort to connect with their patients and their values.

While vivisection gained prominence in the 1800s, its advocates were so cruel they caused a widespread movement against it to emerge and numerous animal welfare laws to be passed.[16,17] Nonetheless, vivisection persisted (with many of its medical advocates holding the same contempt towards the "anti-vivisectionists" as we see now directed at "anti-vaxxers") and the opposition to it has become a forgotten chapter in our history.

This in turn touches upon one of the most important points those activists raised — many of the cruel (and often unnecessary) practices in modern medicine arose from the mentality that gave rise to vivisection, so a good case can be made it is in our own interest to eliminate this malignant foundation modern medicine rests upon.

Dangerous and Wasteful Spending

Following the COVID-19 lab leak, the White Coat Waste Project (WCW) discovered an effective way to stop vivisectionist practices by highlighting not only the cruelty involved but also how much money was being wasted on that risky research. As a result, WCW has repeatedly gotten many stories to go viral (e.g., Fauci spending millions on studies where beagles were restrained so they could be eaten alive by sandflies[18]).

WCW's work touches on a key point — the primary reason much of this research occurs is so that everyone can feed off the grants for it, not because it offers any value to society. For example I recently covered:

- A Colorado University constructing a bat lab to study dangerous infectious diseases that has been widely protested by the community (as they do not want a Wuhan in their backdoor — particularly since FOIA documents showed accidents happened there one to three times a month).

  However, since that University has received 393 million dollars from the NIH since 2014[19] and a 6.7 million dollar NIH grant[20] for the lab, Colorado's government has shut down all attempts to stop the lab.

- Hawaii (particularly Maui) deploying billions of lab-modified mosquitoes (that leave unpleasant bites[21]) to reduce mosquito populations, despite there being no

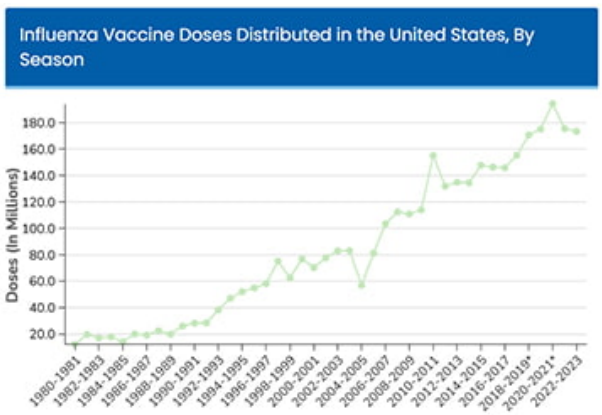
evidence this approach works or is safe for the ecosystem. Like Colorado, despite widespread protest (and lawsuits) against it, Hawaii's government has shut down all attempts to stop the program as **over 33 million dollars in federal grants are financing it**.[22,23,24]

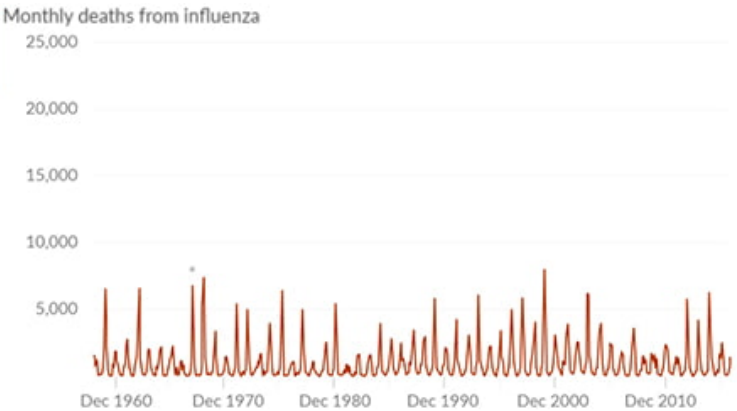
Fortunately, now that D.O.G.E. is auditing the U.S. government's spending, many of these wasteful (or fraudulent) grants are being exposed, and it is quite likely this dangerous research will greatly decrease (particularly since the NIH just stopped sponsoring Universities from being able to pocket most of the funding for themselves[25]).

Pumping and Dumping Vaccines

The annual flu vaccines have a rather poor track record as:

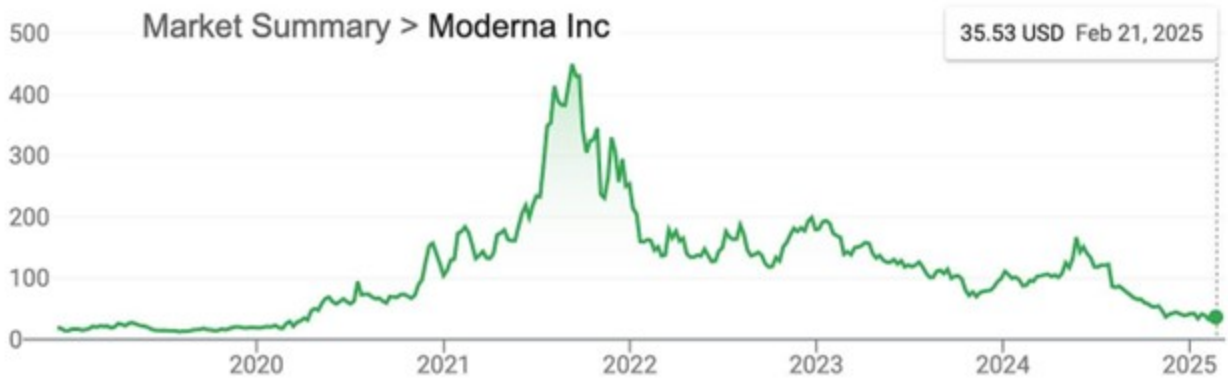
- It is frequently for the "wrong" strain, which beyond it not working, impairs the immune response to the circulating strain as the immune system is already locked onto the nonexistent strain. As such, **studies have shown flu shots make you more likely to catch colds or a flu**.
- The existing (and likely biased) evidence shows you have to vaccinate around 100 people to prevent one minor case of influenza,[26] while the vaccine does not prevent influenza transmission,[27] and does not affect influenza hospitalizations or deaths.[28]
- At best, it has prevented influenza rates from increasing alongside a growing population:

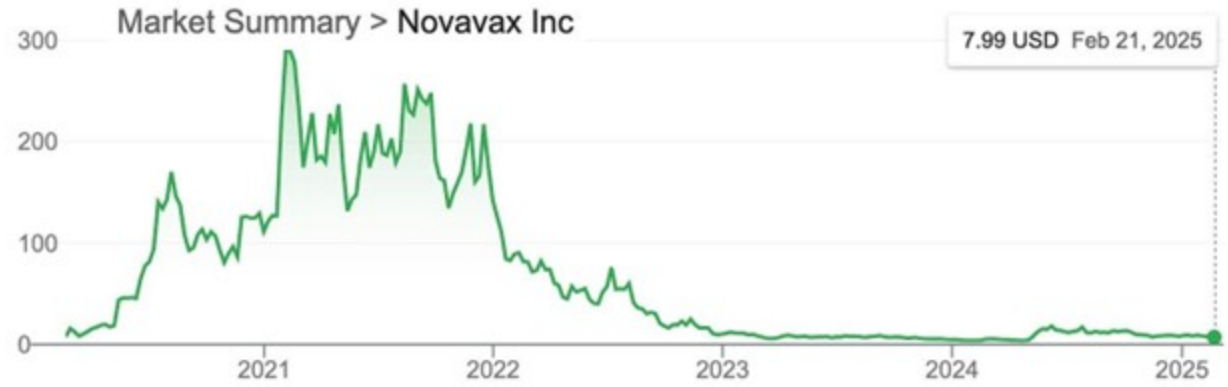




Given this poor efficacy, the real risk of side effects from the vaccines (e.g., one large study found 37.8% of influenza vaccine recipients with an existing heart condition had an adverse reaction and 1.1% of recipients had a severe reaction[29]), it's quite questionable if America is making a good investment buying 150 million influenza vaccine doses each year.[30]

Unfortunately, one of the most common grifts in this industry is to hype up the danger of a new disease, then have a new biotech company present a "cure" (or vaccine) for the disease and offer a large number of shares that investors eagerly buy up (spiking the price).





Once this spike happens, the original owners of the Biotech company will liquidate their existing shares (making a lot of money), after which, the stock typically crashes (as the product does not work).

Note: *Many of the deaths attributed to the flu are likely due to other causes, and as I show* ***here*** *despite flu having been the main focus of the CDC for decades, no one actually knows how deadly the flu is.*

'Managing' Bird Flu

Like COVID, avian influenza has been managed by mass testing of birds, and then using positive tests to justify draconian containment actions. Yet despite this abjectly failing (e.g., the current bird flu has been going on since 2020), the Biodefense industry is simply asking for more (e.g., recently Deborah Birx called for us to test all cows for bird flu).

Video Link

Since poultry have fewer rights than humans, to "stop the spread" each time bird flu is suspected to have entered a facility (e.g., due to a positive PCR test), a rapid cull will be conducted, and at this point, 159 million birds (77.5% of which were egg-laying chickens) have already been culled to stop the current bird flu.[31] Many strongly disagree with this approach as:

- The evidence that it works is quite limited (e.g., a 2024 systematic review, found mass culling is as effective as simply vaccinating flocks[32]).
- The existing evidence shows that culling (of both infected flocks and those in the vicinity) can provide short-term reductions in bird flu cases but it cannot stop epidemics as wild birds continually transmit the virus to flocks.[33] Conversely, over the long term, it worsens things as it increases the genetic susceptibility of the flocks to avian influenza (rather than selecting for the birds that survived and imparting genetic resistance to the flocks).[34]
- Animals that are not at risk of bird flu (e.g., free-range chickens not living in tightly packed indoor buildings) are also being culled.

  Note: *As I show **here**, a very strong case can be made that virtually all the infectious disease deaths vaccines "prevented" were actually due to people previously having atrocious living conditions.*[35]

- Mass culling is quite cruel (and reflective of how much in the same way vivisection is often favored, veterinary medicine will often default to simply euthanizing animals).

Note: *The government has also given Moderna almost a billion dollars (176 million last year and 590 million early this year) to develop mRNA bird flu vaccines (which many Americans do not want in the meat they eat).*

Addressing Bird Flu

Presently, the USDA has the authority to cull any herd where bird flu is suspected (doing so in an "emergency" manner which waives the basic ethical safeguards that exist to protect animal welfare[36]) and then partially compensate farmers for the costs of this.

Note: *Currently, 1.46 billion dollars have been spent on culling compensation.[37] This USDA money (which has fairly few strings attached) disproportionately went to the largest agricultural producers whose stocks have since soared.[38]*

In contrast, I believe the following approaches should be seriously considered.

1. Farmers, especially those raising their birds in healthier conditions, should have the option to allow bird flu to sweep through their flocks and select for the birds that survive with immunity.

2. There should be financial incentives to raise birds in cleaner and less tightly packed conditions rather than funneling that money to the large corporations that keep their birds in unhealthy conditions which encourage the introduction and spread of disease.

3. For over a century, it has been recognized that exposing poultry to ultraviolet light reduced their likelihood of dying and increased their productivity (while unnatural artificial lights often did the opposite).[39] Likewise, it's well known that UV light effectively inactivates various pathogens, including viruses, and in recent days, this approach to bird flu is at last beginning to be explored.[40]

Note: *Similarly, easy to deploy indoor UV lights effectively neutralize viruses[41] and had it been deployed,* ***would have safely stopped COVID's indoor transmission*** *(whereas the pointless lockdowns did not).*

Treating Viral Infections

Since the biodefense and influenza industry revolve around the mythology that viral infections cannot be treated, it's critical to expose that lie and the false pillars that sustain it.

Sunlight

Sunlight is critical for health (e.g., avoiding the sun is more deadly than regular smoking and rather than causing it, **sunlight prevents lethal cancers**). Sunlight also plays a pivotal role in preventing viral illnesses. For example:

- Sunbathing was one of the most effective treatments for the "incurable" 1918 influenza[42] and frequently improves colds and the flu.
- Dozens of studies over the decades have shown that vitamin D is more effective than flu shots at preventing influenza.[43]
- Adequate vitamin D was demonstrated to significantly reduce the severity of COVID-19[44] and risk of dying from it.[45]

  Note: *While vitamin D can improve viral illnesses, it is the most effective as a preventative. As such, it is critical to maintain adequate vitamin D levels (60 to 80 ng/mL) during the flu season (which occurs during periods of reduced sunlight). Additionally, while supplemental vitamin D is helpful, the greatest benefits occur with vitamin D obtained from sunlight.*

Ultraviolet Blood Irradiation (UVBI)

When you are exposed to sunlight, as a small amount enters the bloodstream, the benefits of sunbathing for infections inspired putting UV light directly into the body. UVBI (discussed in detail here) produced such dramatic results (e.g., for otherwise lethal infections and severe autoimmune conditions) that it rapidly spread through America's hospitals until the AMA blacklisted UVBI and it became forgotten.

Fortunately, physicians continued to use it (particularly outside of America) and hundreds of studies have since demonstrated its remarkable utility for a myriad of conditions — including "incurable" viral illnesses. In turn, we routinely see UVBI produce rapid and dramatic improvements for colds and flus (and likewise utilized it throughout COVID-19).

Fevers

Fevers dramatically improve the body's ability to fight viral illnesses. However, since fevers are unpleasant, medical care for viral illnesses primarily revolves around taking a fever suppressing medication.

Remarkably, this has been known since the 1918 influenza, where it was observed that patients who took large doses of aspirin (one of the earliest fever suppressing medications) were much more likely to die. Likewise, NSAIDs like ibuprofen made patients 2.57 times more likely to develop severe pneumonias,[46] while Tylenol made hospitalized patients 3.24 times more likely to die from COVID.[47] In turn, we've discovered:

- Appropriately heating the body is an excellent treatment for colds and flus.
- The discomfort one experiences from a fever is often due to the strain the body undergoes to heat itself rather than the heat itself. As such, the best way to alleviate those symptoms often is to simply heat the body up.

Zeta Potential

Zeta potential quantifies the tendency of colloidal particles in a solution to separate or clump together (e.g., blood cells becoming microclots or lymphatic drainage from the lungs becoming congested) — much of which occurs after a critical threshold has been reached.

One of the major problems with vaccines and many infectious illnesses is that they **impair the body's zeta potential** and cause fluid clumping to happen (e.g., **vaccines frequently trigger observable microstrokes**).

Typically this clumping results in one feeling congested, but if someone already has a zeta potential impairment (which is common in the elderly), the additional fluid clumping can be sufficient to hospitalize them. As such, we often find **improving the physiologic zeta potential** to be immensely helpful for viral illnesses.

Disinfectants

Since viruses initially colonize the upper airway (e.g., ears, nose, and throat), **using an appropriate disinfectant** to eliminate them in those areas before the illness can spread into the lungs is often one of the most effective therapies that exists for acute viral illnesses.

In fact, throughout COVID-19, this approach **was found to be the most effective treatment for the illness** (to the point it likely would have ended the pandemic if the public had been informed). Likewise, for decades I have found this to be an extremely accessible and effective treatment for colds and flus.

Conclusion

While science is an incredible tool that can solve many of the pressing issues humanity faces, I believe the existing financial incentives far too frequently turn it into a force that works against our interests as almost unlimited money exists to "solve" the problems we face, but very little accountability exists for those who fail to produce results.

Fortunately, the new political climate, driven by the Make America Healthy Again movement and the Trump administration's focus on reducing wasteful government spending is shifting things to prioritizing affordable and effective therapies over costly outdated ones. This is an incredible opportunity, and I sincerely hope we can make the best of it.

Author's Note: *This is an abridged version of* ***a longer article*** *that discusses the above points in more detail and reviews the natural therapies we've found consistently treats viral illnesses like colds and flus (along with how to administer them). That article and its additional references can be read* ***here****.*

A Note from Dr. Mercola About the Author

A Midwestern Doctor (AMD) is a board-certified physician from the Midwest and a longtime reader of Mercola.com. I appreciate AMD's exceptional insight on a wide range of topics and am grateful to share it. I also respect AMD's desire to remain anonymous since AMD is still on the front lines treating patients. To find more of AMD's work, be sure to check out **The Forgotten Side of Medicine** on Substack.

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